

PTO/SB/81 (11-04)

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Application Number

Filing Date

First Named Inventor

Title

Art Unit

Examiner Name

Attorney Docket Number

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

000293

OR

☐ Practitioner(s) named below:

Name	Registration Number
Ralph A. Dowell	26868
Wendy M. Slade	53604

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ Firm or Individual Name Ralph A. Dowell of DOWELL & DOWELL, P.C.

Address Suite 406, 2111 Eisenhower Avenue

City Alexandria

State VA

Zip 22314

Country US

Telephone 703 415 2555

Fax 703 415 2559

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Jean-Pierre Pages	Date	9/5/2006
Name	Pages Jean-Pierre	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (11-04)

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Application Number

Filing Date

First Named Inventor

Title

Art Unit

Examiner Name

Attorney Docket Number

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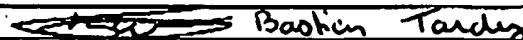
City Alexandria State VA Zip 22314

Country US

Telephone 703 415 2555 Fax 703 415 2559

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	9/5/2006
Name	Tardy Bastien	Telephone	
Title and Company			

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